## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10765766

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TO	OTAL CLAIMS	;	141	,		·		ATE	FEE	OR 	RATE	FEE -
FC	OR		NUMBER	NUMBER FILED		BER EXTRA	BAS	IC FEE	<del> </del>	OR	BASIC FEE	<del>†</del>
TC	OTAL CHARGE	ABLE CLAIMS	41 mir	√\minus 20=		- 21.		S 9=		OR	X\$18=	378
INC	DEPENDENT C	LAIMS	9 mi	inus 3 =	1 1		X.	43=		OR	\	86
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT				+1	45=		OR		0 -
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	L	TAL	-	OR	L	1734
	С	CLAIMS AS A	MENDEL	) - PAR	T II			17.2		] 🔾	OTHER	
		(Column 1)	<del></del>	(Colum		(Column 3)	SM	SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	i	HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RA	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	xs	9=	_	OR	X\$18=	
AME	Independent	*	Minus	***		=	X4	3=		OR	X86=	
	FIRST PHESE	ENTATION OF ML	JETIPLE DEP	'ENDEN1	CLAIM		+14	15=		OR	+290=	
		`				-	L	OTAL		ا ا	TOTAL	
		(Column 1)		(Colum	nn 01	(Column 3)	ADDIT	. FEE L			ADDIT. FEE L	
m		CLAIMS REMAINING		HIĞHE	EST			$\neg$	ADDI-	ı r		ADDI-
AMENDMENT B		AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT • EXTRA	RA	TE	TIONAL		RATE	TIONAL FEE
NDM	Total	*	Minus	**		=	×\$	9=		OR	X\$18=	
AME	Independent	TATION OF MI	Minus	***		=	X4:	3=		OR	.X86=	
	FIRST PHESE	ENTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		+14	5=		OR	+290=	
			T( ADDIT.	OTAL FEE		OR A	TOTAL ADDIT. FEE					
	·	(Column 1)		(Colum		(Column 3)		1			10011.1	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	EST BER USLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	** .		=	X\$ 9	Э=		OR	X\$18=	
AME	Ind pendent	<u> </u>	Minus	*** .	لنـــــــــــــــــــــــــــــــــــــ	=	X43	3=		OR	X86=	
	FIRST PRESE		-									
* ft	f the entry in colur	mn 1 is less than the	e entry in colur	mn 2. write *	"O" in coli	umn 3.	+145			OR	+290=	
** [[	If the "Highest-Nun If the "Highest Nur	mber Previously Pai mber Previously Pai	id For" IN THIS aid For" IN THIS	S SPACE is I S SPACE is I	less than less than	n 20, enter "20." n 3, enter "3."	ADDIT.				TOTAL ADDIT. FEE	
		nber Previously Paid					found in th	ie anni	ropriate box	in colu	ımn 1	